



Mr. J. M. Haight

3401 E. 12<sup>th</sup>

Be 1-4822

871E

Arr. 1:30 to 4:00

Call before you go  
to see if he has  
rec'd post results.

STATEMENT BY LICENSED EMBALMER

CO. 0P

I hereby certify that the body whose name is recorded on the reverse side of this certificate was embalmed by me,  
or by \_\_\_\_\_, Student Embalmer No. \_\_\_\_\_  
working under my personal supervision.

Student \_\_\_\_\_  
Signature of Student Embalmer

Signed James E. Hackman

Licensed Embalmer No. 4573

P.O. Address KC Mo

Note: The above MUST BE SIGNED BY THE LICENSED EMBALMER in his OWN HANDWRITING. (Failure to comply with the above constitutes grounds for revocation of license).

If embalmed by a STUDENT, he also shall sign in his OWN handwriting.

If this body is not embalmed, fact should be so stated above.